

Docket No.: M1071.1440/P1440
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Hideyuki Harada, et al.

Application No.: 09/941,180

Art Unit: 1734

Filed: August 27, 2001

Examiner: M. Mayes

For: MULTILAYER CERAMIC SUBSTRATE
AND MANUFACTURING METHOD
THEREFOR

SUBMISSION

INTRODUCTORY COMMENTS

This is a Submission in connection with the filing of an RCE for the above-identified U.S. patent application.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 7 of this paper.

FEE CALCULATION

Any additional fee required has been calculated as follows:

	No. Claims After Amendment		Highest No. Previously Paid For		Extra Present		Rate	Additional Fee
Total	18	MINUS	20**	=	0	X		\$
Indep.	1	MINUS	3**	=	0	X		\$
First presentation of multiple dependent claim(s)						X		\$
TOTAL								\$ -0-

* not less than 20

** not less than 3

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge any underpayment or credit any overpayment to Deposit Account No. 50-2215.

CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. § 1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. § 1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 50-2215.

REG/1734
18w



<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2005</h3> <p style="font-size: small; margin: 0;">Effective 10/01/2004. Patent fees are subject to annual revision.</p>		<p>Complete if Known</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>09/941,180-Conf. #7067</td></tr> <tr><td>Filing Date</td><td>August 27, 2001</td></tr> <tr><td>First Named Inventor</td><td>Hideyuki Harada</td></tr> <tr><td>Examiner Name</td><td>M. C. Mayes</td></tr> <tr><td>Art Unit</td><td>1734</td></tr> <tr><td>Attorney Docket No.</td><td>M1071.1440</td></tr> </table>		Application Number	09/941,180-Conf. #7067	Filing Date	August 27, 2001	First Named Inventor	Hideyuki Harada	Examiner Name	M. C. Mayes	Art Unit	1734	Attorney Docket No.	M1071.1440
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT (\$) 0.00															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Deposit Account <input type="checkbox"/> None </p> <p> Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP </p> <p>The Director is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments </p> <p>To the above-identified deposit account.</p> <p><input type="checkbox"/> Other (please identify): _____</p>	<p>FEE CALCULATION (continued)</p> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: right;">Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Each claim over 20</td><td style="text-align: right;">18</td><td style="text-align: right;">9</td></tr> <tr><td>Each independent claim over 3</td><td style="text-align: right;">88</td><td style="text-align: right;">44</td></tr> <tr><td>Multiple dependent claims</td><td style="text-align: right;">300</td><td style="text-align: right;">150</td></tr> <tr><td>For Reissues, each claim over 20 and more than in the original patent</td><td style="text-align: right;">18</td><td style="text-align: right;">9</td></tr> <tr><td>For Reissues, each independent claim more than in the original patent</td><td style="text-align: right;">88</td><td style="text-align: right;">44</td></tr> </tbody> </table> <p> Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 or HP = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20 </p> <p> Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3 </p> <p> Multiple Dependent Claims Fee (\$) Fee Paid (\$) _____ </p> <p style="text-align: right;">Subtotal (2) \$ 0.00</p>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	18	9	Each independent claim over 3	88	44	Multiple dependent claims	300	150	For Reissues, each claim over 20 and more than in the original patent	18	9	For Reissues, each independent claim more than in the original patent	88	44
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SUBMITTED BY				
Signature	<i>Edward A. Meilman</i>	Registration No. (Attorney/Agent)	24,735	Telephone (212) 896-5471
Name (Print/Type)	Edward A. Meilman	Date	December 6, 2004	